



City of Las Vegas
Department of Fire & Rescue
Fire Permit Application

Hansen Permit # _____
Parent Project Permit # _____
(General Contractor's Permit A/P #)

PROJECT INFORMATION:

Project Street Address: _____

Project Name: _____

Contractor name: _____ Local Contact phone: _____

Declared Valuation: \$ _____ Contractor State License Number: _____

APPLICATION TYPE:

- | | |
|---|---|
| <input type="checkbox"/> CENTRAL STATION MONITORING (CEN STA) | <input type="checkbox"/> FIRE ALARM SYSTEM OR SPRK MONITORING (FA) |
| <input type="checkbox"/> CLEAN AGENT EXTINGUISHING (EXT SYS) | <input type="checkbox"/> FIRE PUMP SYSTEM (PUMP) |
| <input type="checkbox"/> SPRINKLER SYSTEM (SPR) | <input type="checkbox"/> HOOD EXTINGUISHING SYSTEM (HOOD) |
| <input type="checkbox"/> STANDPIPE SYSTEM (STAND) | <input type="checkbox"/> SMOKE CONTROL SYSTEM (SMK) |
| <input type="checkbox"/> LPG TANKS / PIPING INSTALL (LPG) | <input type="checkbox"/> FUEL TANK / PIPING REPAIR OR INSTALL (UG/AG) |
| <input type="checkbox"/> AVI / ENTRY GATE OR CRASH GATE (AVI) | <input type="checkbox"/> FIRE LINE REPAIR OR INSTALL (WDS) |

I hereby certify that I have carefully examined and read the above application; that the same is true and correct; and that the work herein described is to be done in accordance with all of the provisions of the applicable ordinances of the City of Las Vegas; Nevada and State Laws, whether herein specified or not

Signed Contractor: _____ SFM Master Card # _____

PERMIT & PLAN REVIEW FEES:

- ☐ Plan review or re-submittal fee for drawings:

Administration Fee: \$ 35.00

Initial submittal: \$ No Charge

1st re-submittal: _____ hours @ \$160.00 per hour = \$ _____

2nd or subsequent re-submittals: _____ hours @ \$240.00 per hour = \$ _____

Other *Miscellaneous Services and Activities* fees = \$ _____

Total Plan Review and Service Fees: \$ _____

Permit Fee: \$ _____

- ☐ Permit fee waived for Government Projects (CLV, CC, State of NV)

Fees based on CLV Resolution R-58-2004 on April 7th 2004

Total Fees: \$ _____

Department of Fire Services: _____